

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213535525					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: TriZetto Corporation</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATIONAL REGISTERED AGENTS INC 4701 COX ROAD SUITE 301 GLEN ALLEN, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 7/31/2013</p> <p>SCC ID NO: F1388646</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>3,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	3,000	
CLASS	AUTHORIZED						
COMMON	3,000						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 9655 MAROON CIRCLE</p> <p style="text-align: center;">CITY/ST/ZIP: ENGLEWOOD, CO 80112</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: LINDA S BERNIER TITLE: VICE PRESIDENT ADDRESS: 9655 MAROON CIRCLE CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: LINDA S BERNIER TITLE: VICE PRESIDENT ADDRESS: 9655 MAROON CIRCLE CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME: SALVATORE GENTILE TITLE: VICE PRESIDENT ADDRESS: 9655 MAROON CIRCLE CITY/ST/ZIP/CO: ENGLEWOOD, NJ 80112	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR			

NAME:	WILLIAM J GUMINA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 LEXINGTON AVE, 53RD FLR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10022		
NAME:	JOHN G JORDAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	THOMAS J KEARNS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	JEAN LANDSVERK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	ROBERT RENZI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	ROBERT L SCAVO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	JOHN P SCHAEFER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	CYNTHIA I SCHUMACHER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	DANIEL J SPIREK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/CSMO		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	JOHN M WILSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	JASON A WRIGHT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	601 LEXINGTON AVE, 53RD FLR		
CITY/ST/ZIP/CO:	NEW YORK, NY 10022		

NAME:	KATHLEEN A MALONE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	JOSHUA M PROTASS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	DOUGLAS E BARNETT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	PATRICIA BAILEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	LESLEY BROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	179 LINCOLN STREET		
CITY/ST/ZIP/CO:	BOSTON, MA 02111		
NAME:	CHRISTOPHER H HUNTER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, VA 80112		
NAME:	JAMES LAIRD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	KEVIN S (SCOTT) RAY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	DANIEL RUBIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	KEVIN S MORGAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/CONTROLLER		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	VICKY B GREGG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	9655 MAROON CIRCLE		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK B GANZ DIRECTOR 200 SW MARKET STREET, STE 1500 PORTLAND, OR 97201	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWIN J GILLIS DIRECTOR 9655 MAROON CIRCLE ENGLEWOOD, CO 80112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM M GRACEY DIRECTOR 1 CAMERON HILL CIRCLE CHATTANOOGA, TN 37402	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM J GUMINA DIRECTOR 601 LEXINGTON AVE, 53RD FLR NEW YORK, NY 10022	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONALD J LOTHROP DIRECTOR 9655 MAROON CIRCLE ENGLEWOOD, CO 80112	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JASON A WRIGHT DIRECTOR 601 LEXINGTON AVE, 53RD FLR NEW YORK, NY 10022	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOHN P SCHAEFER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN P SCHAEFER, SECRETARY PRINTED NAME AND CORPORATE TITLE	7/30/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			